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Sustained release pharmaceutical composition

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SUSTAINED RELEASE PHARMACEUTICAL  
COMPOSITION

The present invention relates to sustained release pharmaceutical compositions.

A sustained release pharmaceutical composition has many advantages such as reduced frequency of administration, decrease of side effects, and maintenance of effective concentrations of medicament in the blood. Accordingly, various types of sustained release pharmaceutical composition have hitherto been developed, for example, one containing a great amount of excipient which disintegrates slowly in the stomach or intestines, one in the form of a granule or tablet coated with repellent, one covered with semipermeable membrane, and one in which a polymer having low solubility or which is hydrophylic is mixed with, adsorbed in or combined with a medicament to gradually release the medicament. As polymer for the latter purpose, there may be used acid-type carboxyvinyl polymer, polyvinyl alcohol, or polyacrylic acid, etc. However, sustained release pharmaceutical compositions usually give only relatively low bioavailability of active ingredient; and with a medicament of low solubility its effective concentration in the blood may not be obtainable or maintainable.

The present invention provides a sustained release pharmaceutical composition containing solid medicament in amorphous form compounded with polyethylene oxide, in which the medicament is one of  
5 nicardipine, a nicardipine salt, nifedipine, indenerol, indomethacin and a buformin salt. We have found that such compositions can exhibit satisfactory sustained release of the solid medicament.

Compositions of the invention preferably  
10 contain at least one additive (1) selected from hydroxypropylmethyl cellulose, hydroxypropyl cellulose, methyl cellylose, polyvinyl pyrrolidone, carboxyvinyl polymer, hydroxypropylmethyl cellulose phthalate, cellulose acetate phthalate, methyl methacrylate  
15 methacrylic acid copolymer, polyvinylacetal diethylaminoacetate, dimethylaminoethyl methacrylate methacrylic acid copolymer, 2-methyl-5-vinylpyridinemethyl acrylate methacrylic acid copolymer, citric acid, urea, succinic acid and amino acids; it may also contain at  
20 least one further additive (2) selected from surface active agents, polyethylene glycol, propylene glycol, glycerin, glycerin fatty acid esters and vegetable oils.

Some compositions of the invention can be  
25 obtained by a method in which the solid medicament and additive(s) from the above lists are dissolved in an organic solvent

(e.g. one or more of methanol, ethanol, chloroform, dichloromethane) or water, and then the solvent is removed. The removal of the solvent can be carried out by drying under reduced or normal pressure, spray drying, fluidized-bed  
5 granulating drying, or lyophilization, etc. A fine powder or fine particle granules are thus obtained in which solid medicament is dissolved or dispersed uniformly in amorphous form in the additive(s). Then PEO is added and mixed in to provide the sustained release pharmaceutical  
10 composition.

Another method instead includes PEO in the solution, to become uniformly dissolved or dispersed with solid medicament in the additive(s) on solvent removal.

Examples of suitable amino acid additives are  
15 threonine, glycine, alanine, cysteine, lysine, etc. Suitable surface active agents include anionic agents such as sodium alkylsulfate, and non-ionic agents such as polyoxyethylene sorbitan fatty acid ester, polyoxyethylene fatty acid ester, polyoxyethylene castor oil derivatives, etc. Exemplary  
20 vegetable oils are sesame oil, corn oil, soybean oil, rapeseed oil, olive oil, coconut oil, etc.

The compounding ratios of the components in the pharmaceutical composition vary according to the solid

medicament used and its administration dose. Usually, it is appropriate to use 0.5 - 20 (preferably 1 - 10) parts by weight of additive(s) (1) and 0.05 - 10 (preferably 0.1 - 5) parts by weight of additive(s) (2), per part by weight of  
5 solid medicament. The compounding ratio of PEO

is suitably 0.1 - 50 (preferably 0.5 - 30) parts by weight per part by weight of combined solid medicament plus said additives.

Substained release pharmaceutical  
10 compositions according to the invention have PEO  
compounded in the fine powder or fine particle granules in which solid medicament is contained in amorphous form. Hitherto, polyethylene oxide has been used as a coating agent or binder in the preparation of pharmaceutical compositions,  
15 but it has not been reported that a sustained release pharmaceutical composition can be obtained by compounding polyethylene oxide with a solid medicament in amorphous form as in the present invention.

The pharmaceutical compositions of the present  
20 invention can be formulated as powders, granules, tablets, pills, or capsules in conventional manner. In the preparation of such formulations, there may be used conventional diluting agents, binders, viscosity-increasing agents etc. Further, according to the kind of solid medicament, a compound for  
25 dissolving the latter quickly can be included or treatment for dissolving the composition in the intestines can be applied.

As mentioned above, the invention can provide in sustained release form the medicament nicardipine, which

possesses coronary and cerebral vascular dilator activity and is useful for curing cerebral vascular disease, hypertension and angina pectoris. Hitherto, it has been difficult to provide a sustained release nicardipine composition because of its low solubility in the intestines. Nicardipine and its salts are easily dissolved in the first liquid (artificial gastric juice) of Japanese Pharmacopeia, thus exhibiting sufficient medical activity as usually formulated, but are only slightly soluble in the second liquid (artificial intestinal juice).

Compositions according to the invention containing nicardipine can sustain an effective concentration of nicardipine in the blood for long periods due to good absorbability by the intestinal tract membrane, in spite of the low solubility of nicardipine in intestinal juice.

Amorphous nicardipine (and its salts) used in the present invention can be prepared by friction-pulverizing nicardipine powder, preferably using a ball mill or vibrating ball mill.

In the pulverizing step, it may be desirable to add one or more substances to decrease the adherence and massing of the nicardipine or nicardipine salt. Examples of such substances are calcium lactate, TC-5 (trade name, Shinetsu Kagaku Kogyo Co., ingredient : hydroxypropylmethyl cellulose), Avicel<sup>(RTM)</sup> (trade <sup>mark</sup> name, Asahikasei Kogyo Co.,

ingredient : crystalline cellulose), etc. The change of nicardipine or its salt to the amorphous form in the pulverizing step can be confirmed by X-ray diffraction.

5 The amount of nicardipine or nicardipine salt is usually 5 - 90% (preferably 10 - 70% and more preferably 20 - 40%) of the total weight of the composition. Nicardipine powder is usually in crystalline form; for example, nicardipine hydrochloride is a crystal having a melting point of 168 - 170°C. It is however possible to produce  
10 amorphous nicardipine by synthesis or purification, and in that case the amorphous nicardipine obtained can be used as it is for preparing a composition of the present invention.

The fine powder of amorphous nicardipine and its  
15 salts exhibits a sustained release effect when coated to avoid disintegration and dissolution in the stomach. It can also exhibit such effect with addition of pH-depending agent, viscosity-increasing agent or water-insoluble agent before or after pulverizing.

20 Examples of pH-depending agent are bases soluble in the intestines such as cellulose acetate phthalate, hydroxypropylmethyl cellulose, Eudragit L, S, RL and RS (trade  
~~names~~ <sup>marks</sup>, Rome and Haas Co., ingredient acrylic acid meta-acrylic acid ester copolymer, or meta-acrylic acid meta-acrylic acid  
25 ester copolymer), etc.; as viscosity-increasing agents there are polyethylene oxide, Carbopol (trade name, B.F. Goodrich Co., ingredient: carboxyvinyl polymer), sodium polyacrylate, sodium arginate, carboxymethyl cellulose calcium, carboxymethyl cellulose sodium, polyethylene glycol (molecular



weight: 6000 - 20000), etc.; and as water-insoluble agents are crystalline cellulose (for example, Avicel (trade<sup>mark</sup>~~name~~)), calcium phosphate, etc.

5           The degree of pulverizing of the nicardipine or its salt and the amount of the above agents added can be selected to predetermine when and over what period the medicament is released.

10           The present invention is illustrated by the following Examples wherein the solid medicament used in each case is in amorphous form.

### Example 1

1000 g of a mixture of dichloromethane and methanol (1 : 1 in weight ratio) was added to a mixture of 50 g of nicardipine hydrochloride and 100 g of hydroxypropylmethyl cellulose to provide<sup>a</sup> solution. The organic solvent of the solution was distilled off by spray-drying to provide fine particle powder. To 50 g of the fine particle powder thus obtained were added 30 g of the fine particle powder of polyethylene oxide and 3.3 g of talc, and they were mixed uniformly. Capsules were prepared by filling each 250 mg of the mixture into No. 1 capsules.

### Example 2

1000 g of dichloromethane was added to a mixture of 50 g of nifedipine, 50 g of polyethylene glycol 400 and 250 g of polyvinyl pyrrolidone to provide a solution, and 25 g of magnesium meta-silicate aluminate was dispersed uniformly in the solution. Using a fluidized-bed granulator, 350 g of anhydrous calcium hydrogen phosphate was fluidized and sprayed with the above solution to provide fine granules. To 250 g of the fine granules thus obtained were added 89.5 g of the fine particle powder of polyethylene oxide, 7 g of talc and 3.5 g of magnesium stearate, and they were mixed uniformly. Tablets each weighing 350 mg were prepared using an oblong punch having a major axis of 14 mm and a minor axis of 7 mm.

### Example 3

3000 g of a mixture of dichloromethane and methanol (1 : 1 weight ratio) was added to a mixture of 100 g of indomethacin,

200 g of hydroxypropyl cellulose and 20 g of polyethylene oxide to provide a solution. The organic solvent of the solution was distilled off by spray-drying to provide fine particle powder. To 160 g of the fine particle powder thus obtained were added 80 g of polyethylene oxide and 10 g of talc, and they were mixed uniformly. Capsules were prepared by filling each 250 mg of the mixture into No. 1 capsules.

#### Example 4

400 g of methanol was added to a mixture of 20 g of nicardipine hydrochloride, 40 g of hydroxypropylmethyl cellulose phthalate and 10 g of polysorbate 80 to provide a solution. The organic solvent of the solution was distilled off by drying under reduced pressure to provide a solid material. The solid material was pulverized to fine particle powder. To 35 g of the fine particle powder thus obtained were added 105 g of fine crystalline cellulose, 80 g of polyethylene oxide and 10 g of talc, and they were mixed uniformly. Capsules were prepared by filling each 230 mg of the mixture into No. 1 capsules.

Example 5

40 g of the crystalline powder of nicardipine hydrochloride, 200 g of calcium lactate and 20 g of polyethylene oxide 18 were pulverized for 10 hours in a vibrating ball mill, whereby the crystals of nicardipine hydrochloride changed to amorphous form. Using<sup>a</sup> fluidized-bed granulator ("Uniglat" trade name, Okawara Seisakusho Co.), 195 g of the powder thus obtained and 150 g of Kalica GS (trade name, Kyowa Kagaku Kogyo Co., ingredient: anhydrous calcium hydrogen phosphate) were fluidized, sprayed with a solution of 20 g of polyethylene oxide-18 in 3000 ml of methylene chloride, and treated in conventional manner to provide fine granules. Capsules were prepared by filling each 365 mg of the fine granules thus obtained into No.1 capsules in conventional manner.

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C L A I M S :

1. A sustained release pharmaceutical composition containing solid medicament in amorphous form compounded with polyethylene oxide, in which the medicament is one of nicardipine, a nicardipine salt, nifedipine, indenerol, indomethacin and a buformin salt.
2. A composition according to any preceding claim including at least one additive selected from pH-dependent agents, viscosity increasing agents, and water-insoluble agents.
3. A composition according to any preceding claim which contains at least one of hydroxypropylmethyl cellulose, hydroxypropyl cellulose, methyl cellulose, polyvinyl pyrrolidone, carboxyvinyl polymer, hydroxypropylmethyl cellulose phthalate, cellulose acetate phthalate, methyl methacrylate methacrylic acid copolymer, polyvinylacetal diethylaminoacetate, dimethylaminoethyl methacrylate methacrylic acid copolymer, 2-methyl-5-vinylpyridinmethyl acrylate methacrylic acid copolymer, citric acid, urea, succinic acid and amino acid.
4. A composition according to any preceding claim which also contains at least one of surface active agent, polyethylene glycol, propylene glycol, glycerin, glycerin fatty acid ester and vegetable oil.

5. A process of producing a sustained release pharmaceutical composition which comprises compounding a solid medicament in amorphous form with polyethene oxide, in which the medicament is one of nicardipine, a nicardipine salt, nifedipine, indenerol, indomethacin and a buformin salt.

6. A process according to claim 5 which comprises dissolving in water or an organic solvent the solid medicament and at least one additive selected from hydroxypropyl-methyl cellulose, hydroxypropyl cellulose, methyl cellulose, polyvinyl pyrrolidone, carboxyvinyl polymer, hydroxypropyl-methyl cellulose phthalate, cellulose acetate phthalate, methyl methacrylate methacrylic acid copolymer, polyvinyl-acetal diethylaminoacetate, dimethylaminoethyl meta-acrylate methacrylic acid copolymer, 2-methyl-5-vinylpyridinmethyl acrylate methacrylic acid copolymer, citric acid, urea, succinic acid, amino acids, surface active agents, polyethylene glycol, propylene glycol, glycerin, glycerin fatty acid ester and vegetable oils, distilling off the solvent, and then adding polyethylene oxide.

7. A process according to claim 6 modified by dissolving the medicament, additive and polyethylene oxide in the solvent which is then removed.

8. A process according to claim 5 wherein the medicament is converted to amorphous form by pulverizing.

9. A process according to claim 8 wherein the medicament is pulverized in a ball mill or vibrating ball mill.

10. A process according to any of claims 5 to 9 wherein the medicament comprises nicardipine or a salt thereof.

11. A sustained release pharmaceutical composition substantially as hereinbefore described in any of the Examples.

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